

Candidate
REPORT OF RECEIPTS AND DISBURSEMENTS
Special Election

Name of Committee Friends of Quentin Whitwell

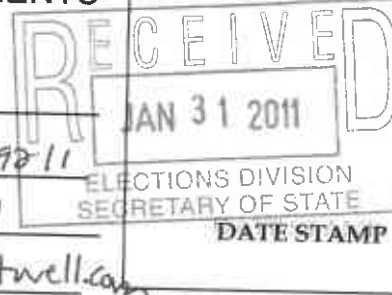
Address 4266 1-55 North, Suite 108, Jackson, MS 39211

Telephone 601-366-4255

Fax 888-870-6727

Treasurer Ben Allen

Email info@quentinwhitwell.com



☐ Check here if above is different from previous report

TYPE OF REPORT

- ☐ January 4, 2011 Pre-Election Report (January 1, 2010, through January 1, 2011).....Mandatory
- ☐ January 25, 2011 Pre-Election Report (January 2, 2010 through January 22, 2010).....Runoff Candidates only
- ☒ January 31, 2011 Annual Report (January 1, 2010 through December 31, 2010).....Mandatory
- ☐ Termination Report (Candidate will no longer accept contributions or make campaign expenditures and has no outstanding campaign debt obligation) Required to terminate reporting obligations

IMPORTANT

- (1) Pre-Election reports are mandatory, even if no contributions or expenditures have occurred. In such case, the candidate shall submit a report indicating "0" (Zero) for total amount of reported contributions and expenditures during this period.
- (2) Until a Candidate files a Termination Report, annual and periodic reports must still be filed in accordance with Miss. Code Ann. § 23-15-807 (b) (ii) and (iii).
- (3) The receiving authority must be in actual receipt of the required reports by 5:00 p.m. on the reporting day. If the deadline falls on a weekend or a holiday, the office must be in actual receipt of the required reports by 5:00 p.m. on the first working day before the deadline. Faxed reports are acceptable.

REPORTED CONTRIBUTIONS AND DISBURSEMENTS

	Itemized + Non-itemized =	This Period	Calendar Year-To-Date
Total amount of contributions	\$ 26,944 +\$	\$ 26,944.00	\$ 26,944.00
Total amount of disbursements	\$ 16,988.51 +\$	\$ 16,988.51	\$ 16,988.51
Total amount of cash on hand		\$ 9,955.49	

I certify that I have examined this report and to the best of my knowledge and belief it is true, accurate, and complete.

Signature of Director or Treasurer

Date

Authority: Refer to Miss. Code Ann. §23-15-801 (1972) et. seq. for statutory requirements.

Penalties: Failure to submit required reports, or failure to submit reports in accordance with statutory deadlines, or failure to submit valid reports shall result in fines of \$50 per day and/or prosecution in accordance with Miss. Code Ann. §§ 23-15-811 and 813 (1972).

SEND TO: 1. Candidates for Statewide, State district, multi-county and all legislative offices should return form to Secretary of State, Elections Division, P. O. Box 136, Jackson, MS 39205 or fax to 601-359-1499 or 601-576-2819.
2. Candidates for countywide and county district offices should return forms to their county Circuit Clerk.

Name of Candidate or Committee Friends of Quentin Whitwell
 Reporting period Nov. 1, 2010 through Dec. 31, 2010

ITEMIZED DISBURSEMENTS

A. Full name <u>Howl Design</u>	Date (Mo., Day, Year) <u>11/29/10</u>	Amount of each disbursement this period \$ <u>1,070.00</u>
Mailing Address <u>P.O. Box 12663</u>		
City, State, Zip Code <u>Jackson, MS 39236</u>	<u>11/29/10</u>	\$
Purpose of Disbursement (Optional) <u>Website</u>	Aggregate Year-to-date	\$ <u>1,070.00</u>
B. Full name <u>Larry Brewer</u>	Date (Mo., Day, Year) <u>11/29/10</u>	Amount of each disbursement this period \$ <u>150.00</u>
Mailing Address <u>P.O. Box 308</u>		
City, State, Zip Code <u>Madison, MS 39130</u>	<u>11/29/10</u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ <u>150.00</u>
C. Full name <u>Top It Off</u>	Date (Mo., Day, Year) <u>11/29/10</u>	Amount of each disbursement this period \$ <u>57.78</u>
Mailing Address <u>4800 1.55 North, Ste. 16</u>		
City, State, Zip Code <u>Jackson, MS 39211</u>	<u>12/8/10</u>	\$ <u>23.54</u>
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ <u>81.32</u>
D. Full name <u>Julep</u>	Date (Mo., Day, Year) <u>12/1/10</u>	Amount of each disbursement this period \$ <u>1,461.28</u>
Mailing Address <u>1305 East Northside Dr. #105</u>		
City, State, Zip Code <u>Jackson, MS 39211</u>	<u>12/1/10</u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ <u>1,461.28</u>
E. Full name <u>Hederman Brothers</u>	Date (Mo., Day, Year) <u>12/7/10</u>	Amount of each disbursement this period \$ <u>395.40</u>
Mailing Address <u>P.O. Box 6100</u>		
City, State, Zip Code <u>Ridgeland, MS 39158</u>	<u>12/7/10</u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ <u>395.40</u>
F. Full name <u>Mills Photography</u>	Date (Mo., Day, Year) <u>12/7/10</u>	Amount of each disbursement this period \$ <u>200.00</u>
Mailing Address <u>8 CR 207</u>		
City, State, Zip Code <u>Oxford, MS 38655</u>	<u>12/7/10</u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ <u>200.00</u>

Name of Candidate or Committee Friends of Quentin Whitwell
 Reporting period Nov. 1, 2010 through Dec. 31, 2010

ITEMIZED DISBURSEMENTS

A. Full name <u>U.S.P.S.</u>	Date (Mo., Day, Year) <u>12/7/10</u>	Amount of each disbursement this period \$ <u>88.⁰⁰</u>
Mailing Address		
City, State, Zip Code	<u>1/1/1</u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ <u>88.⁰⁰</u>
B. Full name <u>G. Williams Marketing, Inc.</u>	Date (Mo., Day, Year) <u>12/9/10</u>	Amount of each disbursement this period \$ <u>8,494.¹⁵</u>
Mailing Address <u>755 Avignon Drive</u>		
City, State, Zip Code <u>Ridgeland, MS 39157</u>	<u>1/1/1</u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ <u>8,494.¹⁵</u>
C. Full name <u>AmeriMail Digital Direct, LLC</u>	Date (Mo., Day, Year) <u>12/13/10</u>	Amount of each disbursement this period \$ <u>4,348.³⁶</u>
Mailing Address <u>P.O. Box 2174</u>		
City, State, Zip Code <u>Jackson, MS 39225-2174</u>	<u>1/1/1</u>	\$
Purpose of Disbursement (Optional) <u>direct mail</u>	Aggregate Year-to-date	\$ <u>4,348.³⁶</u>
D. Full name <u>The Donor Tree</u>	Date (Mo., Day, Year) <u>12/20/10</u>	Amount of each disbursement this period \$ <u>700.⁰⁰</u>
Mailing Address <u>4266 1-55 North</u>		
City, State, Zip Code <u>Jackson, MS 39211</u>	<u>1/1/1</u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ <u>700.⁰⁰</u>
E. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	<u>1/1/1</u>	\$
City, State, Zip Code	<u>1/1/1</u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
F. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	<u>1/1/1</u>	\$
City, State, Zip Code	<u>1/1/1</u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$

Name of Candidate or Committee Friends of Quentin WhitwellReporting period Oct. 1, 2010 through Dec 31, 2010

ITEMIZED RECEIPTS

A. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>James P. Hathcock</u>		<u>12/22/10</u>	\$ <u>100.00</u>
Mailing Address <u>2314 E. Manor Drive</u>		<u>1/1/</u>	\$
City, State, Zip Code <u>Jackson, ms 39211</u>		<u>1/1/</u>	\$
Name of Employer (Required) <u>CTIS</u>		<u>1/1/</u>	\$
Occupation (Required) <u>Executive</u>		Aggregate year-to-date	\$ <u>100.00</u>
B. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Bryan M. Clay</u>		<u>12/15/10</u>	\$ <u>50.00</u>
Mailing Address <u>3819 Eastover Drive</u>		<u>1/1/</u>	\$
City, State, Zip Code <u>Jackson, ms 39211</u>		<u>1/1/</u>	\$
Name of Employer (Required) <u>Ear Nose & Throat Surgical Group</u>		<u>1/1/</u>	\$
Occupation (Required) <u>medical Doctor - otiorhinolaryngology</u>		Aggregate year-to-date	\$ <u>50.00</u>
C. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Hu Meena</u>		<u>12/17/10</u>	\$ <u>500.00</u>
Mailing Address <u>1018 Highland Colony Parkway, Ste 310</u>		<u>1/1/</u>	\$
City, State, Zip Code <u>Ridgeland, ms 39157</u>		<u>1/1/</u>	\$
Name of Employer (Required) <u>Cellular South</u>		<u>1/1/</u>	\$
Occupation (Required) <u>CEO</u>		Aggregate year-to-date	\$ <u>500.00</u>
D. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>James B. Stuart</u>		<u>12/28/10</u>	\$ <u>50.00</u>
Mailing Address <u>5472 Kaywood Drive</u>		<u>1/1/</u>	\$
City, State, Zip Code <u>Jackson, ms 39211</u>		<u>1/1/</u>	\$
Name of Employer (Required) _____		<u>1/1/</u>	\$
Occupation (Required) <u>Retired</u>		Aggregate year-to-date	\$ <u>50.00</u>

Name of Candidate or Committee Friends of Quentin WhitwellReporting period Oct. 1, 2010 through Dec. 31, 2010

ITEMIZED RECEIPTS

A. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Mrs. Lola Crocker</u>	<u>12/17/10</u>	\$ <u>10.00</u>
Mailing Address <u>PO Box 2502</u>	<u> 1 1 </u>	\$
City, State, Zip Code <u>Ridgeland, MS 39158</u>	<u> 1 1 </u>	\$
Name of Employer (Required) <u>South Central Bell (previously)</u>	<u> 1 1 </u>	\$
Occupation (Required) <u>Retired</u>	Aggregate year-to-date	\$ <u>10.00</u>
B. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Joel Travelstead</u>	<u>12/29/10</u>	\$ <u>200.00</u>
Mailing Address <u>170 Montbrook Drive</u>	<u> 1 1 </u>	\$
City, State, Zip Code <u>Jackson, MS 39206</u>	<u> 1 1 </u>	\$
Name of Employer (Required) <u>Southern Investment Financing, LLC</u>	<u> 1 1 </u>	\$
Occupation (Required) <u>CPA & Business Owner</u>	Aggregate year-to-date	\$ <u>200.00</u>
C. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Jewell Cooper</u>	<u>12/27/10</u>	\$ <u>25.00</u>
Mailing Address <u>5335 Kaywood Drive</u>	<u> 1 1 </u>	\$
City, State, Zip Code <u>Jackson, MS 39211</u>	<u> 1 1 </u>	\$
Name of Employer (Required)	<u> 1 1 </u>	\$
Occupation (Required) <u>Retired</u>	Aggregate year-to-date	\$ <u>25.00</u>
D. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>William L. Colbert, Jr.</u>	<u>12/18/10</u>	\$ <u>100.00</u>
Mailing Address <u>73 N. Crownpointe Drive</u>	<u> 1 1 </u>	\$
City, State, Zip Code <u>Jackson, MS 39211</u>	<u> 1 1 </u>	\$
Name of Employer (Required) <u>Rhoden, Lacy, Downey & Colbert</u>	<u> 1 1 </u>	\$
Occupation (Required) <u>attorney</u>	Aggregate year-to-date	\$ <u>100.00</u>

Name of Candidate or Committee Friends of Quentin WhitwellReporting period Oct. 1, 2010 through Dec. 31, 2010

ITEMIZED RECEIPTS

A. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Ruth B. Tant</u>		<u>12/22/10</u>	\$ <u>100.00</u>
Mailing Address <u>26 Waterford Place</u>		<u>1/1/10</u>	\$
City, State, Zip Code <u>Jackson, MS 39211</u>		<u>1/1/10</u>	\$
Name of Employer (Required) _____		<u>1/1/10</u>	\$
Occupation (Required) <u>Retired</u>		Aggregate year-to-date	\$ <u>100.00</u>
B. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Scott F. Miller</u>		<u>12/20/10</u>	\$ <u>200.00</u>
Mailing Address <u>204 St. Andrews Dr.</u>		<u>1/1/10</u>	\$
City, State, Zip Code <u>Jackson, MS 39211</u>		<u>1/1/10</u>	\$
Name of Employer (Required) <u>Miller Transporters, Inc.</u>		<u>1/1/10</u>	\$
Occupation (Required) <u>President</u>		Aggregate year-to-date	\$ <u>200.00</u>
C. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Emil Pearlite</u>		<u>12/17/10</u>	\$ <u>50.00</u>
Mailing Address <u>11 Avery Circle</u>		<u>1/1/10</u>	\$
City, State, Zip Code <u>Jackson, MS 39211</u>		<u>1/1/10</u>	\$
Name of Employer (Required) <u>SELF (Hughes Eastern Corp.)</u>		<u>1/1/10</u>	\$
Occupation (Required) <u>Engineer</u>		Aggregate year-to-date	\$ <u>50.00</u>
D. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Doyle Moorhead</u>		<u>12/14/10</u>	\$ <u>25.00</u>
Mailing Address <u>1618 Acadia Court</u>		<u>1/1/10</u>	\$
City, State, Zip Code <u>Jackson, MS 39211</u>		<u>1/1/10</u>	\$
Name of Employer (Required) _____		<u>1/1/10</u>	\$
Occupation (Required) <u>Retired</u>		Aggregate year-to-date	\$ <u>25.00</u>

Name of Candidate or Committee Friends of Quentin WhitwellReporting period Oct. 1, 2010 through Dec. 31, 2010

ITEMIZED RECEIPTS

A. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>PLLC</u>		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>McCraney Montagnet & Quin, PLLC</u>		<u>12/22/10</u>	\$ <u>500.00</u>
Mailing Address <u>602 Steed Road, Suite 200</u>		<u>1/1/1</u>	\$
City, State, Zip Code <u>Ridgeland, MS 39157</u>		<u>1/1/1</u>	\$
Name of Employer (Required) <u>McCraney Montagnet & Quin</u>		<u>1/1/1</u>	\$
Occupation (Required) <u>Attorneys at Law Firm</u>		Aggregate year-to-date	\$ <u>500.00</u>
B. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Darden North</u>		<u>12/21/10</u>	\$ <u>100.00</u>
Mailing Address <u>2565 Lake Circle</u>		<u>1/1/1</u>	\$
City, State, Zip Code <u>Jackson, MS 39211</u>		<u>1/1/1</u>	\$
Name of Employer (Required) <u>Jackson Healthcare for Women</u>		<u>1/1/1</u>	\$
Occupation (Required) <u>Medical Doctor-obstetrician/gynecologist</u>		Aggregate year-to-date	\$ <u>100.00</u>
C. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Judith Barnett</u>		<u>12/23/10</u>	\$ <u>100.00</u>
Mailing Address <u>2248 Sheffield Drive</u>		<u>1/1/1</u>	\$
City, State, Zip Code <u>Jackson, MS 39211</u>		<u>1/1/1</u>	\$
Name of Employer (Required) _____		<u>1/1/1</u>	\$
Occupation (Required) <u>Retired</u>		Aggregate year-to-date	\$ <u>100.00</u>
D. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Perry Eugene Phillips</u>		<u>12/21/10</u>	\$ <u>20.00</u>
Mailing Address <u>P.O. Box 79015</u>		<u>1/1/1</u>	\$
City, State, Zip Code <u>Jackson, MS 39236</u>		<u>1/1/1</u>	\$
Name of Employer (Required) <u>Insured Planning Services</u>		<u>1/1/1</u>	\$
Occupation (Required) <u>Financial Advisor</u>		Aggregate year-to-date	\$ <u>20.00</u>

Name of Candidate or Committee Friends of Quentin Whitmire
 Reporting period Oct. 1, 2010 through Dec. 31, 2010

ITEMIZED RECEIPTS

A. Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Neel-Schaffer</u>	<u>12/9/10</u>	\$ <u>500.00</u>
Mailing Address <u>P.O. Box 22625</u>	<u>1/1/</u>	\$
City, State, Zip Code <u>Jackson, ms 39225</u>	<u>1/1/</u>	\$
Name of Employer (Required) <u>Neel-Schaffer</u>	<u>1/1/</u>	\$
Occupation (Required) <u>Engineering firm</u>	Aggregate year-to-date	\$ <u>500.00</u>
B. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Pauline Ricchetti</u>	<u>12/15/10</u>	\$ <u>50.00</u>
Mailing Address <u>6209 Northlake Circle</u>	<u>1/1/</u>	\$
City, State, Zip Code <u>Jackson ms 39211</u>	<u>1/1/</u>	\$
Name of Employer (Required) <u>none</u>	<u>1/1/</u>	\$
Occupation (Required) <u>Homemaker</u>	Aggregate year-to-date	\$ <u>50.00</u>
C. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Victor B. Clark</u>	<u>12/15/10</u>	\$ <u>100.00</u>
Mailing Address <u>5475 Ridgewood Rd.</u>	<u>1/1/</u>	\$
City, State, Zip Code <u>Jackson, ms 39211</u>	<u>1/1/</u>	\$
Name of Employer (Required) <u>none</u>	<u>1/1/</u>	\$
Occupation (Required) <u>Retired</u>	Aggregate year-to-date	\$ <u>100.00</u>
D. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Kinkade's Fine Clothing, LLC</u>	<u>12/1/10</u>	\$ <u>200.00</u>
Mailing Address <u>120 W. Jackson, St., Suite 2B</u>	<u>1/1/</u>	\$
City, State, Zip Code <u>Ridgeland, ms 39157</u>	<u>1/1/</u>	\$
Name of Employer (Required) <u>Kinkade's Fine Clothing, LLC</u>	<u>1/1/</u>	\$
Occupation (Required) <u>Apparel Retailer</u>	Aggregate year-to-date	\$ <u>200.00</u>

Name of Candidate or Committee Friends of Quentin WhitwellReporting period Oct. 1, 2010 through Dec. 31, 2010

ITEMIZED RECEIPTS

A. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name	<u>Benjamin P. Thompson</u>	<u>12/17/10</u>	\$ <u>200.00</u>
Mailing Address	<u>P.O. Box 16097</u>	<u> 1 1 </u>	\$
City, State, Zip Code	<u>Jackson, MS 39236</u>	<u> 1 1 </u>	\$
Name of Employer (Required)	<u>The Mayflower Group</u>	<u> 1 1 </u>	\$
Occupation (Required)	<u>Lobbyist</u>	Aggregate year-to-date	\$ <u>200.00</u>
B. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name	<u>Bill E. Harrison</u>	<u>12/14/10</u>	\$ <u>50.00</u>
Mailing Address	<u>9 Mass Forest Place</u>	<u> 1 1 </u>	\$
City, State, Zip Code	<u>Jackson, MS 39211</u>	<u> 1 1 </u>	\$
Name of Employer (Required)		<u> 1 1 </u>	\$
Occupation (Required)	<u>Retired</u>	Aggregate year-to-date	\$ <u>50.00</u>
C. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name	<u>Terry L. Smith</u>	<u>12/16/10</u>	\$ <u>10.00</u>
Mailing Address	<u>644 Newland Street</u>	<u> 1 1 </u>	\$
City, State, Zip Code	<u>Jackson, MS 39211</u>	<u> 1 1 </u>	\$
Name of Employer (Required)	<u>none</u>	<u> 1 1 </u>	\$
Occupation (Required)	<u>homemaker</u>	Aggregate year-to-date	\$ <u>10.00</u>
D. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name	<u>Ramona L. Jones</u>	<u>12/15/10</u>	\$ <u>100.00</u>
Mailing Address	<u>3 Gleneagles Drive</u>	<u> 1 1 </u>	\$
City, State, Zip Code	<u>Jackson, MS 39211</u>	<u> 1 1 </u>	\$
Name of Employer (Required)	<u>Baker Donelson</u>	<u> 1 1 </u>	\$
Occupation (Required)	<u>attorney</u>	Aggregate year-to-date	\$ <u>100.00</u>

Name of Candidate or Committee Friends of Quentin WhitwellReporting period Oct. 1, 2010 through Dec. 31, 2010

ITEMIZED RECEIPTS

A. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Joe W. Whitwell, Jr.</u>	<u>12/16/10</u>	\$ <u>50.00</u>
Mailing Address <u>694 Bramlett Shoals Road</u>	<u>—/—/—</u>	\$
City, State, Zip Code <u>Lawrenceville, GA 30045</u>	<u>—/—/—</u>	\$
Name of Employer (Required) <u>Snellville Family Counseling</u>	<u>—/—/—</u>	\$
Occupation (Required) <u>Therapist</u>	Aggregate year-to-date	\$ <u>50.00</u>
B. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Wade H. Overstreet</u>	<u>12/14/10</u>	\$ <u>250.00</u>
Mailing Address <u>4115 Comanche Drive</u>	<u>—/—/—</u>	\$
City, State, Zip Code <u>Jackson, MS 39211</u>	<u>—/—/—</u>	\$
Name of Employer (Required) <u>BCBSMS Foundation</u>	<u>—/—/—</u>	\$
Occupation (Required) <u>Director</u>	Aggregate year-to-date	\$ <u>250.00</u>
C. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>James B. Furrh, Jr.</u>	<u>12/16/10</u>	\$ <u>200.00</u>
Mailing Address <u>4450 Old Canton Rd., Suite 205</u>	<u>—/—/—</u>	\$
City, State, Zip Code <u>Jackson, MS 39211</u>	<u>—/—/—</u>	\$
Name of Employer (Required) <u>Self</u>	<u>—/—/—</u>	\$
Occupation (Required) <u>Oil & Gas</u>	Aggregate year-to-date	\$ <u>200.00</u>
D. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Joe T. Scott</u>	<u>12/15/10</u>	\$ <u>250.00</u>
Mailing Address <u>86 St. Andrews Drive</u>	<u>—/—/—</u>	\$
City, State, Zip Code <u>Jackson, MS 39211</u>	<u>—/—/—</u>	\$
Name of Employer (Required) <u>self</u>	<u>—/—/—</u>	\$
Occupation (Required) <u>Realtor</u>	Aggregate year-to-date	\$ <u>250.00</u>

Name of Candidate or Committee Friends of Quentin WhitwellReporting period Oct. 1, 2010 through Dec. 31, 2010

ITEMIZED RECEIPTS

A. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>J. Stevenson Ray</u>	<u>12/15/10</u>	\$ <u>100.00</u>
Mailing Address <u>4708 North Hampton Drive</u>	<u>1/1/10</u>	\$
City, State, Zip Code <u>Jackson, MS 39211</u>	<u>1/1/10</u>	\$
Name of Employer (Required) <u>Butler Snow</u>	<u>1/1/10</u>	\$
Occupation (Required) <u>Attorney</u>	Aggregate year-to-date	\$ <u>100.00</u>
B. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Mr. Ted S. Orkin</u>	<u>12/15/10</u>	\$ <u>100.00</u>
Mailing Address <u>1006 Northpointe Drive</u>	<u>1/1/10</u>	\$
City, State, Zip Code <u>Jackson, MS 39211</u>	<u>1/1/10</u>	\$
Name of Employer (Required) <u>Orkin Property Management</u>	<u>1/1/10</u>	\$
Occupation (Required) <u>Asst. Manager</u>	Aggregate year-to-date	\$ <u>100.00</u>
C. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Sam Riddell</u>	<u>12/15/10</u>	\$ <u>25.00</u>
Mailing Address <u>5451 River Thames Road</u>	<u>1/1/10</u>	\$
City, State, Zip Code <u>Jackson, MS 39211</u>	<u>1/1/10</u>	\$
Name of Employer (Required) _____	<u>1/1/10</u>	\$
Occupation (Required) <u>Retired</u>	Aggregate year-to-date	\$ <u>25.00</u>
D. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>C.B. Sledge</u>	<u>12/15/10</u>	\$ <u>25.00</u>
Mailing Address <u>5310 River Thames</u>	<u>1/1/10</u>	\$
City, State, Zip Code <u>Jackson, MS 39211</u>	<u>1/1/10</u>	\$
Name of Employer (Required) <u>Sledge CB Insurance</u>	<u>1/1/10</u>	\$
Occupation (Required) <u>Insurance Broker</u>	Aggregate year-to-date	\$ <u>25.00</u>

Name of Candidate or Committee Friends of Quentin Whitwell

Reporting period Oct. 1, 2010 through Dec. 31, 2010

ITEMIZED RECEIPTS

A. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>J. Ligon Duncan III</u>		<u>12/15/10</u>	\$ <u>100.00</u>
Mailing Address <u>22515 Heritage Hill Drive</u>		<u>1/1/10</u>	\$
City, State, Zip Code <u>Jackson, MS 39211</u>		<u>1/1/10</u>	\$
Name of Employer (Required) <u>First Presbyterian Church of Jackson</u>		<u>1/1/10</u>	\$
Occupation (Required) <u>Pastor</u>		Aggregate year-to-date	\$ <u>100.00</u>
B. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Mrs. Don Mizell</u>		<u>12/14/10</u>	\$ <u>25.00</u>
Mailing Address <u>4290 Quail Run Road</u>		<u>1/1/10</u>	\$
City, State, Zip Code <u>Jackson, MS 39211</u>		<u>1/1/10</u>	\$
Name of Employer (Required) _____		<u>1/1/10</u>	\$
Occupation (Required) <u>Retired</u>		Aggregate year-to-date	\$ <u>25.00</u>
C. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Roy H. Furrh</u>		<u>12/14/10</u>	\$ <u>199.00</u>
Mailing Address <u>4614 Katherine Blvd.</u>		<u>1/1/10</u>	\$
City, State, Zip Code <u>Jackson, MS 39211</u>		<u>1/1/10</u>	\$
Name of Employer (Required) <u>MS Dept. of Environmental Quality</u>		<u>1/1/10</u>	\$
Occupation (Required) <u>Attorney</u>		Aggregate year-to-date	\$ <u>199.00</u>
D. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Mr. Jay A. Travis III</u>		<u>12/15/10</u>	\$ <u>30.00</u>
Mailing Address <u>2465 Sand Ridge Drive</u>		<u>1/1/10</u>	\$
City, State, Zip Code <u>Jackson, MS 39211</u>		<u>1/1/10</u>	\$
Name of Employer (Required) <u>Butler Snow</u>		<u>1/1/10</u>	\$
Occupation (Required) <u>Attorney</u>		Aggregate year-to-date	\$ <u>30.00</u>

Name of Candidate or Committee Friends of Quentin WhitwellReporting period Oct. 1, 2010 through Dec. 31, 2010

ITEMIZED RECEIPTS

A. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Stephen F. Lee</u>		<u>12/5/10</u>	\$ <u>200.00</u>
Mailing Address <u>4326 Dalrymple Court</u>		<u>1/1/</u>	\$
City, State, Zip Code <u>Jackson, MS 39211</u>		<u>1/1/</u>	\$
Name of Employer (Required) <u>MS ENT Surgical Associates</u>		<u>1/1/</u>	\$
Occupation (Required) <u>Medical Doctor</u>		Aggregate year-to-date	\$ <u>200.00</u>
B. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Jerry Veazey, Jr.</u>		<u>12/7/10</u>	\$ <u>200.00</u>
Mailing Address <u>218 Hidden Oaks Drive</u>		<u>1/1/</u>	\$
City, State, Zip Code <u>Ridgeland, MS 39157</u>		<u>1/1/</u>	\$
Name of Employer (Required) <u>Boltrell Insurance</u>		<u>1/1/</u>	\$
Occupation (Required) <u>Insurance Agent</u>		Aggregate year-to-date	\$ <u>200.00</u>
C. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Susan S. Brabec</u>		<u>12/1/10</u>	\$ <u>100.00</u>
Mailing Address <u>2151 Sheffield Drive</u>		<u>1/1/</u>	\$
City, State, Zip Code <u>Jackson, MS 39211</u>		<u>1/1/</u>	\$
Name of Employer (Required) <u>SSB Pharmacy Services</u>		<u>1/1/</u>	\$
Occupation (Required) <u>Pharmacist</u>		Aggregate year-to-date	\$ <u>100.00</u>
D. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Parrish Fortenberry</u>		<u>12/1/10</u>	\$ <u>100.00</u>
Mailing Address <u>660 Camdenpark Drive</u>		<u>1/1/</u>	\$
City, State, Zip Code <u>Ridgeland, MS 39157</u>		<u>1/1/</u>	\$
Name of Employer (Required) <u>MS Valley Title Insurance Company</u>		<u>1/1/</u>	\$
Occupation (Required) <u>V.P.</u>		Aggregate year-to-date	\$ <u>100.00</u>

Name of Candidate or Committee Friends of Quentin WhitwellReporting period Oct. 1, 2010 through Dec. 31, 2010

ITEMIZED RECEIPTS

A. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>W. Wright Hill, Jr.</u>	<u>11/30/10</u>	\$ <u>100.00</u>
Mailing Address <u>908 Fairview Street</u>	<u> </u> / <u> </u> / <u> </u>	\$
City, State, Zip Code <u>Jackson, MS 39202</u>	<u> </u> / <u> </u> / <u> </u>	\$
Name of Employer (Required) <u>Page, Kruger & Holland, PA</u>	<u> </u> / <u> </u> / <u> </u>	\$
Occupation (Required) <u>Attorney</u>	Aggregate year-to-date	\$ <u>100.00</u>
B. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Stacy G. Underwood</u>	<u>12/3/10</u>	\$ <u>200.00</u>
Mailing Address <u>732 Arlington Street</u>	<u> </u> / <u> </u> / <u> </u>	\$
City, State, Zip Code <u>Jackson, MS 39202</u>	<u> </u> / <u> </u> / <u> </u>	\$
Name of Employer (Required) <u>none</u>	<u> </u> / <u> </u> / <u> </u>	\$
Occupation (Required) <u>homemaker</u>	Aggregate year-to-date	\$ <u>200.00</u>
C. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Scott Andress</u>	<u>12/1/10</u>	\$ <u>200.00</u>
Mailing Address <u>758 Arlington Street</u>	<u> </u> / <u> </u> / <u> </u>	\$
City, State, Zip Code <u>Jackson, MS 39202</u>	<u> </u> / <u> </u> / <u> </u>	\$
Name of Employer (Required) <u>Balch & Bingham, LLP</u>	<u> </u> / <u> </u> / <u> </u>	\$
Occupation (Required) <u>Attorney</u>	Aggregate year-to-date	\$ <u>200.00</u>
D. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Stuart M. Irby</u>	<u>12/1/10</u>	\$ <u>1,000.00</u>
Mailing Address <u>3940 Stuart Place</u>	<u> </u> / <u> </u> / <u> </u>	\$
City, State, Zip Code <u>Jackson, MS 39211</u>	<u> </u> / <u> </u> / <u> </u>	\$
Name of Employer (Required) <u>Stuart C. Irby Company</u>	<u> </u> / <u> </u> / <u> </u>	\$
Occupation (Required) <u>Business Owner</u>	Aggregate year-to-date	\$ <u>1,000.00</u>

Name of Candidate or Committee Friends of Quentin WhitwellReporting period Oct. 1, 2010 through Dec. 31, 2010

ITEMIZED RECEIPTS

A. Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Wright Watchers in Greater Mississippi</u>		<u>12/9/10</u>	\$ <u>200.00</u>
Mailing Address <u>P.O. Box 16463</u>		<u>1/1/10</u>	\$
City, State, Zip Code <u>Jackson, MS 39236</u>		<u>1/1/10</u>	\$
Name of Employer (Required) _____		<u>1/1/10</u>	\$
Occupation (Required) _____		Aggregate year-to-date	\$ <u>200.00</u>
B. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>Trust</u>		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>J. Kelley Williams Revocable Trust</u>		<u>12/1/10</u>	\$ <u>200.00</u>
Mailing Address <u>2030 Eastover Drive</u>		<u>1/1/10</u>	\$
City, State, Zip Code <u>Jackson, MS 39211</u>		<u>1/1/10</u>	\$
Name of Employer (Required) _____		<u>1/1/10</u>	\$
Occupation (Required) _____		Aggregate year-to-date	\$ <u>200.00</u>
C. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Tommy Page</u>		<u>11/12/10</u>	\$ <u>100.00</u>
Mailing Address <u>103 Woodlands Green Cove</u>		<u>1/1/10</u>	\$
City, State, Zip Code <u>Brandon, MS 39047</u>		<u>1/1/10</u>	\$
Name of Employer (Required) <u>Page, Kruger, & Holland, P.A.</u>		<u>1/1/10</u>	\$
Occupation (Required) <u>Attorney</u>		Aggregate year-to-date	\$ <u>100.00</u>
D. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Cooper Morrison</u>		<u>11/30/10</u>	\$ <u>200.00</u>
Mailing Address <u>1017 Pinehurst Place</u>		<u>1/1/10</u>	\$
City, State, Zip Code <u>Jackson, MS 39202</u>		<u>1/1/10</u>	\$
Name of Employer (Required) <u>Morrison Development, LLC</u>		<u>1/1/10</u>	\$
Occupation (Required) <u>Owner</u>		Aggregate year-to-date	\$ <u>200.00</u>

Name of Candidate or Committee Friends of Quentin Whitwell
 Reporting period Oct. 1, 2010 through Dec. 31, 2010

ITEMIZED RECEIPTS

A. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name	<u>Don Cannada</u>	<u>12/1/10</u>	\$ <u>100.00</u>
Mailing Address	<u>4110 Sandridge Drive</u>	<u>1/1/10</u>	\$
City, State, Zip Code	<u>Jackson, MS 39211</u>	<u>1/1/10</u>	\$
Name of Employer (Required)	<u>Butler, Snow, O'Mara, Stevens & Cannada, P.C.</u>	<u>1/1/10</u>	\$
Occupation (Required)	<u>Attorney</u>	Aggregate year-to-date	\$ <u>100.00</u>
B. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name	<u>B. Ryan Cole</u>	<u>11/9/10</u>	\$ <u>300.00</u>
Mailing Address	<u>1709 Sheffield Drive</u>	<u>1/1/10</u>	\$
City, State, Zip Code	<u>Jackson, MS 39211</u>	<u>1/1/10</u>	\$
Name of Employer (Required)	<u>Trilogy Communications</u>	<u>1/1/10</u>	\$
Occupation (Required)	<u>Senior V.P.</u>	Aggregate year-to-date	\$ <u>300.00</u>
C. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name	<u>Samuel M. Lane</u>	<u>11/9/10</u>	\$ <u>200.00</u>
Mailing Address	<u>2 Rivers Creek Drive</u>	<u>1/1/10</u>	\$
City, State, Zip Code	<u>Jackson, MS 39211</u>	<u>1/1/10</u>	\$
Name of Employer (Required)	<u>First Commercial Bank</u>	<u>1/1/10</u>	\$
Occupation (Required)	<u>Banker</u>	Aggregate year-to-date	\$ <u>200.00</u>
D. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name	<u>Cary L. Spencer</u>	<u>11/5/10</u>	\$ <u>50.00</u>
Mailing Address	<u>4058 Eastwood Place</u>	<u>1/1/10</u>	\$
City, State, Zip Code	<u>Jackson, MS 39211</u>	<u>1/1/10</u>	\$
Name of Employer (Required)	<u>Cary Spencer Consultants, LLC</u>	<u>1/1/10</u>	\$
Occupation (Required)	<u>owner</u>	Aggregate year-to-date	\$ <u>50.00</u>

Name of Candidate or Committee Friends of Quentin WhitwellReporting period Oct 1, 2010 through Dec 31, 2010

ITEMIZED RECEIPTS

A. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Mr. Carson M. Hughes</u>		<u>11/8/10</u>	\$ <u>200.00</u>
Mailing Address <u>1018 Highland Colony Pkwy, Ste 500</u>		<u>—/—/—</u>	\$
City, State, Zip Code <u>Ridgeland, MS 39157</u>		<u>—/—/—</u>	\$
Name of Employer (Required) _____		<u>—/—/—</u>	\$
Occupation (Required) <u>Attorney</u>		Aggregate year-to-date	\$ <u>200.00</u>
B. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Crymes M. Pittman</u>		<u>11/8/10</u>	\$ <u>200.00</u>
Mailing Address <u>2213 Heritage Hill Drive</u>		<u>—/—/—</u>	\$
City, State, Zip Code <u>Jackson, MS 39211</u>		<u>—/—/—</u>	\$
Name of Employer (Required) <u>Pittman, Germany, Roberts & Welsh, LLP</u>		<u>—/—/—</u>	\$
Occupation (Required) <u>Attorney</u>		Aggregate year-to-date	\$ <u>200.00</u>
C. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Richard M. Dye</u>		<u>11/12/10</u>	\$ <u>200.00</u>
Mailing Address <u>4120 Crestview Drive</u>		<u>—/—/—</u>	\$
City, State, Zip Code <u>Jackson, MS 39211</u>		<u>—/—/—</u>	\$
Name of Employer (Required) <u>Butler Snow Law Firm</u>		<u>—/—/—</u>	\$
Occupation (Required) <u>Attorney</u>		Aggregate year-to-date	\$ <u>200.00</u>
D. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>James B. Galloway</u>		<u>11/9/10</u>	\$ <u>200.00</u>
Mailing Address <u>17 Baytowne Row</u>		<u>—/—/—</u>	\$
City, State, Zip Code <u>Madison, MS 39160</u>		<u>—/—/—</u>	\$
Name of Employer (Required) <u>Butler, Snow</u>		<u>—/—/—</u>	\$
Occupation (Required) <u>Attorney</u>		Aggregate year-to-date	\$ <u>200.00</u>

Name of Candidate or Committee Friends of Quentin WhitwellReporting period Oct. 1, 2010 through Dec. 31, 2010

ITEMIZED RECEIPTS

A. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Arthur D. Spratlin, Jr.</u>		<u>11/12/10</u>	\$ <u>100.00</u>
Mailing Address <u>2480 Sandridge Drive</u>		<u> </u> <u> </u> <u> </u>	\$
City, State, Zip Code <u>Jackson, MS 39211</u>		<u> </u> <u> </u> <u> </u>	\$
Name of Employer (Required) <u>Butler Snow Law Firm</u>		<u> </u> <u> </u> <u> </u>	\$
Occupation (Required) <u>Attorney</u>		Aggregate year-to-date	\$ <u>100.00</u>
B. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Allison Fielder</u>		<u>11/12/10</u>	\$ <u>200.00</u>
Mailing Address <u>2134 Brackenshire Circle</u>		<u> </u> <u> </u> <u> </u>	\$
City, State, Zip Code <u>Jackson, MS 39211</u>		<u> </u> <u> </u> <u> </u>	\$
Name of Employer (Required) <u>Jazz</u>		<u> </u> <u> </u> <u> </u>	\$
Occupation (Required) <u>Specialty Sales Consultant</u>		Aggregate year-to-date	\$ <u>200.00</u>
C. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Robert A. Miller</u>		<u>11/12/10</u>	\$ <u>200.00</u>
Mailing Address <u>2332 Twin Lakes Circle</u>		<u> </u> <u> </u> <u> </u>	\$
City, State, Zip Code <u>Jackson, MS 39211</u>		<u> </u> <u> </u> <u> </u>	\$
Name of Employer (Required) <u>Butler Snow Law Firm</u>		<u> </u> <u> </u> <u> </u>	\$
Occupation (Required) <u>Attorney</u>		Aggregate year-to-date	\$ <u>200.00</u>
D. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Sara W. Morgan</u>		<u>11/10/10</u>	\$ <u>200.00</u>
Mailing Address <u>4130 Crestview Drive</u>		<u> </u> <u> </u> <u> </u>	\$
City, State, Zip Code <u>Jackson, MS 39211</u>		<u> </u> <u> </u> <u> </u>	\$
Name of Employer (Required) <u>none</u>		<u> </u> <u> </u> <u> </u>	\$
Occupation (Required) <u>Home maker</u>		Aggregate year-to-date	\$ <u>200.00</u>

Name of Candidate or Committee Friends of Quentin WhitwellReporting period Oct. 1, 2010 through Dec. 31, 2010

ITEMIZED RECEIPTS

A. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Gabe P. Baldwin</u>		<u>11/10/10</u>	\$ <u>1,000.00</u>
Mailing Address <u>115 Royal Lytham</u>		<u>—/—/—</u>	\$
City, State, Zip Code <u>Jackson, MS 39211</u>		<u>—/—/—</u>	\$
Name of Employer (Required) <u>BankPlus</u>		<u>—/—/—</u>	\$
Occupation (Required) <u>Banker</u>		Aggregate year-to-date	\$ <u>1,000.00</u>
B. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>William Quinn Smith</u>		<u>11/15/10</u>	\$ <u>200.00</u>
Mailing Address <u>425 Beechwood Lane</u>		<u>—/—/—</u>	\$
City, State, Zip Code <u>Madison, MS 39110</u>		<u>—/—/—</u>	\$
Name of Employer (Required) <u>self</u>		<u>—/—/—</u>	\$
Occupation (Required) <u>CPA</u>		Aggregate year-to-date	\$ <u>200.00</u>
C. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Charles C. Bush, Jr.</u>		<u>11/10/10</u>	\$ <u>200.00</u>
Mailing Address <u>2219 Sheffield Drive</u>		<u>—/—/—</u>	\$
City, State, Zip Code <u>Jackson, MS 39211</u>		<u>—/—/—</u>	\$
Name of Employer (Required) <u>Jackson Healthcare for Women</u>		<u>—/—/—</u>	\$
Occupation (Required) <u>Medical Doctor</u>		Aggregate year-to-date	\$ <u>200.00</u>
D. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>PLLC</u>		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Robert F. Wilkins Law Firm, PLLC</u>		<u>11/12/10</u>	\$ <u>250.00</u>
Mailing Address <u>475 East Capitol Street</u>		<u>—/—/—</u>	\$
City, State, Zip Code <u>Jackson, MS 39201</u>		<u>—/—/—</u>	\$
Name of Employer (Required) <u>Robert F. Wilkins Law Firm, PLLC</u>		<u>—/—/—</u>	\$
Occupation (Required) <u>Attorneys at Law</u>		Aggregate year-to-date	\$ <u>250.00</u>

Name of Candidate or Committee Friends of Quentin WhitnellReporting period Oct. 1, 2010 through Dec. 31, 2010

ITEMIZED RECEIPTS

A. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>P.A.</u>		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Jackson Pulmonary Associates, P.A.</u>		<u>11/11/10</u>	\$ <u>200.00</u>
Mailing Address <u>971 Lakeland Drive, Suite 1052</u>		<u>—/—/—</u>	\$
City, State, Zip Code <u>Jackson, MS 39216</u>		<u>—/—/—</u>	\$
Name of Employer (Required) <u>Jackson Pulmonary Associates, PA</u>		<u>—/—/—</u>	\$
Occupation (Required) <u>medical Doctors</u>		Aggregate year-to-date	\$ <u>200.00</u>
B. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Adelaide M. Louis</u>		<u>11/15/10</u>	\$ <u>200.00</u>
Mailing Address <u>4078 Eastwood Pl</u>		<u>—/—/—</u>	\$
City, State, Zip Code <u>Jackson, MS 39211</u>		<u>—/—/—</u>	\$
Name of Employer (Required) <u>Jackson Prep</u>		<u>—/—/—</u>	\$
Occupation (Required) <u>Teacher</u>		Aggregate year-to-date	\$ <u>200.00</u>
C. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Jason S. Greener</u>		<u>11/15/10</u>	\$ <u>200.00</u>
Mailing Address <u>1916 Kirkwood Place</u>		<u>—/—/—</u>	\$
City, State, Zip Code <u>Jackson, MS 39211</u>		<u>—/—/—</u>	\$
Name of Employer (Required) <u>Stribling Equipment</u>		<u>—/—/—</u>	\$
Occupation (Required) <u>Vice-President</u>		Aggregate year-to-date	\$ <u>200.00</u>
D. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Dr. Nikki D. Cleveland</u>		<u>11/19/10</u>	\$ <u>500.00</u>
Mailing Address <u>2086 Collegewood Road</u>		<u>—/—/—</u>	\$
City, State, Zip Code <u>Jackson, MS 39211</u>		<u>—/—/—</u>	\$
Name of Employer (Required) <u>Mississippi Oncology Associates</u>		<u>—/—/—</u>	\$
Occupation (Required) <u>medical doctor</u>		Aggregate year-to-date	\$ <u>500.00</u>

Name of Candidate or Committee Friends of Quentin Whitwell
 Reporting period Oct. 1, 2010 through Dec. 31, 2010

ITEMIZED RECEIPTS

A. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>John Ditto III</u>	<u>11/20/10</u>	\$ <u>250.00</u>
Mailing Address <u>2134 Sheffield Drive</u>	<u>__/__/__</u>	\$
City, State, Zip Code <u>Jackson, MS 39211</u>	<u>__/__/__</u>	\$
Name of Employer (Required) <u>State Street Group, LLC</u>	<u>__/__/__</u>	\$
Occupation (Required) <u>President</u>	Aggregate year-to-date	\$ <u>250.00</u>
B. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>J. Ryan Perkins</u>	<u>11/20/10</u>	\$ <u>200.00</u>
Mailing Address <u>1774 Hillview Drive</u>	<u>__/__/__</u>	\$
City, State, Zip Code <u>Jackson, MS 39211</u>	<u>__/__/__</u>	\$
Name of Employer (Required) <u>Wilkins, Tipton</u>	<u>__/__/__</u>	\$
Occupation (Required) <u>Attorney</u>	Aggregate year-to-date	\$ <u>200.00</u>
C. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>John P. Fullenwider</u>	<u>11/8/10</u>	\$ <u>1,000.00</u>
Mailing Address <u>P.O. Box 2020</u>	<u>__/__/__</u>	\$
City, State, Zip Code <u>Oxford, MS 38655</u>	<u>__/__/__</u>	\$
Name of Employer (Required) <u>JPB Pathology</u>	<u>__/__/__</u>	\$ <u>1,000.00</u>
Occupation (Required) <u>Pathologist</u>	Aggregate year-to-date	\$ <u>1,000.00</u>
D. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Johnny Morgan</u>	<u>11/11/10</u>	\$ <u>500.00</u>
Mailing Address <u>904 North Lamar</u>	<u>__/__/__</u>	\$
City, State, Zip Code <u>Oxford, MS 38655</u>	<u>__/__/__</u>	\$
Name of Employer (Required) <u>Morgan White Insurance</u>	<u>__/__/__</u>	\$
Occupation (Required) <u>Insurance Agent/Owner</u>	Aggregate year-to-date	\$ <u>500.00</u>

Name of Candidate or Committee Friends of Quentin WhitwellReporting period Oct. 1, 2010 through Dec. 31, 2010

ITEMIZED RECEIPTS

A. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Philip Holman</u>		<u>11/9/10</u>	\$ <u>200.00</u>
Mailing Address <u>5430 Charter Oak Place</u>		<u>___/___/___</u>	\$
City, State, Zip Code <u>Jackson, ms 39211</u>		<u>___/___/___</u>	\$
Name of Employer (Required) <u>P. Holman Inc.</u>		<u>___/___/___</u>	\$
Occupation (Required) <u>Owner</u>		Aggregate year-to-date	\$ <u>200.00</u>
B. Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Highland Village LLC</u>		<u>11/23/10</u>	\$ <u>200.00</u>
Mailing Address <u>4500 I-55 North, Suite 281</u>		<u>___/___/___</u>	\$
City, State, Zip Code <u>Jackson, ms 39211</u>		<u>___/___/___</u>	\$
Name of Employer (Required) _____		<u>___/___/___</u>	\$
Occupation (Required) _____		Aggregate year-to-date	\$ <u>200.00</u>
C. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Cassie A. Smith</u>		<u>11/24/10</u>	\$ <u>200.00</u>
Mailing Address <u>2226 Cheryl Drive</u>		<u>___/___/___</u>	\$
City, State, Zip Code <u>Jackson, ms 39211</u>		<u>___/___/___</u>	\$
Name of Employer (Required) <u>none</u>		<u>___/___/___</u>	\$
Occupation (Required) <u>homemaker</u>		Aggregate year-to-date	\$ <u>200.00</u>
D. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Suzanne Guild</u>		<u>11/24/10</u>	\$ <u>200.00</u>
Mailing Address <u>1412 Fontaine Drive</u>		<u>___/___/___</u>	\$
City, State, Zip Code <u>Jackson, ms 39211</u>		<u>___/___/___</u>	\$
Name of Employer (Required) <u>none</u>		<u>___/___/___</u>	\$
Occupation (Required) <u>homemaker</u>		Aggregate year-to-date	\$ <u>200.00</u>

Name of Candidate or Committee Friends of Quentin WhitwellReporting period Oct. 1, 2010 through Dec. 31, 2010

ITEMIZED RECEIPTS

A. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>John Ravenstein</u>	<u>11/15/10</u>	\$ <u>200.00</u>
Mailing Address <u>2377 Twin Lakes Circle</u>	<u>___/___/___</u>	\$
City, State, Zip Code <u>Jackson, ms 39211</u>	<u>___/___/___</u>	\$
Name of Employer (Required) <u>Juniker Jewelry</u>	<u>___/___/___</u>	\$
Occupation (Required) <u>owner</u>	Aggregate year-to-date	\$ <u>200.00</u>
B. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Conrad Ebner</u>	<u>11/15/10</u>	\$ <u>200.00</u>
Mailing Address <u>5474 River Thames Place</u>	<u>___/___/___</u>	\$
City, State, Zip Code <u>Jackson, ms 39211</u>	<u>___/___/___</u>	\$
Name of Employer (Required) <u>TEC Partners</u>	<u>___/___/___</u>	\$
Occupation (Required) <u>owner</u>	Aggregate year-to-date	\$ <u>200.00</u>
C. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Julie M. Galloway</u>	<u>11/23/10</u>	\$ <u>500.00</u>
Mailing Address <u>22 Highland Meadows Drive</u>	<u>___/___/___</u>	\$
City, State, Zip Code <u>Jackson, ms 39211</u>	<u>___/___/___</u>	\$
Name of Employer (Required) <u>PopFizz</u>	<u>___/___/___</u>	\$ -
Occupation (Required) <u>Retailer</u>	Aggregate year-to-date	\$ <u>500.00</u>
D. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Charles E. Ross</u>	<u>11/24/10</u>	\$ <u>200.00</u>
Mailing Address <u>P.O. Box 651</u>	<u>___/___/___</u>	\$
City, State, Zip Code <u>Jackson, ms 39205</u>	<u>___/___/___</u>	\$
Name of Employer (Required) <u>Wise Carter</u>	<u>___/___/___</u>	\$
Occupation (Required) <u>Attorney</u>	Aggregate year-to-date	\$ <u>200.00</u>

Name of Candidate or Committee Friends of Quentin Whitwell
Reporting period Oct. 1, 2010 through Dec. 31, 2010

ITEMIZED RECEIPTS

A. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Stuart Alan Whitaker</u>		<u>11/24/10</u>	\$ <u>200.00</u>
Mailing Address <u>1011 Pinehurst Place</u>		<u>11/24/10</u>	\$
City, State, Zip Code <u>Jackson, ms 39202</u>		<u>11/24/10</u>	\$
Name of Employer (Required) <u>The Whit Group</u>		<u>11/24/10</u>	\$
Occupation (Required) <u>Software Developer</u>		Aggregate year-to-date	\$ <u>200.00</u>
B. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>W.D. Mowrer</u>		<u>11/24/10</u>	\$ <u>1,000.00</u>
Mailing Address <u>200 E. Capital St., Ste. 1601</u>		<u>11/24/10</u>	\$
City, State, Zip Code <u>Jackson, ms 39201</u>		<u>11/24/10</u>	\$
Name of Employer (Required) _____		<u>11/24/10</u>	\$
Occupation (Required) <u>Retired</u>		Aggregate year-to-date	\$ <u>1,000.00</u>
C. Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Bancorp South</u>		<u>11/23/10</u>	\$ <u>500.00</u>
Mailing Address <u>P.O. Box 789</u>		<u>11/23/10</u>	\$
City, State, Zip Code <u>Tupelo, ms 38802</u>		<u>11/23/10</u>	\$
Name of Employer (Required) _____		<u>11/23/10</u>	\$
Occupation (Required) _____		Aggregate year-to-date	\$ <u>500.00</u>
D. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Hamp Dye</u>		<u>11/24/10</u>	\$ <u>50.00</u>
Mailing Address <u>5329 Saratoga Drive</u>		<u>11/24/10</u>	\$
City, State, Zip Code <u>Jackson, ms 39211</u>		<u>11/24/10</u>	\$
Name of Employer (Required) <u>Wesley Biblical Seminary</u>		<u>11/24/10</u>	\$
Occupation (Required) <u>VP Advancement</u>		Aggregate year-to-date	\$ <u>50.00</u>

Name of Candidate or Committee Friends of Quentin Whitwell
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ITEMIZED RECEIPTS

A. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Edward C. Maloney</u>	<u>11/22/10</u>	\$ <u>500.00</u>
Mailing Address <u>1313 Harding Street</u>	<u>__/__/__</u>	\$
City, State, Zip Code <u>Jackson, ms 39202</u>	<u>__/__/__</u>	\$
Name of Employer (Required) <u>Cowboy Maloney's</u>	<u>__/__/__</u>	\$
Occupation (Required) <u>Owner</u>	Aggregate year-to-date	\$ <u>500.00</u>
B. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Chris Claybrook</u>	<u>11/21/10</u>	\$ <u>200.00</u>
Mailing Address <u>1802 Howard Street</u>	<u>__/__/__</u>	\$
City, State, Zip Code <u>Jackson, ms 39202</u>	<u>__/__/__</u>	\$
Name of Employer (Required) <u>Regions Bank</u>	<u>__/__/__</u>	\$
Occupation (Required) <u>Banker</u>	Aggregate year-to-date	\$ <u>200.00</u>
C. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Alon W. Bee</u>	<u>11/15/10</u>	\$ <u>100.00</u>
Mailing Address <u>104 Brae Burn Drive</u>	<u>__/__/__</u>	\$
City, State, Zip Code <u>Jackson, ms 39211</u>	<u>__/__/__</u>	\$
Name of Employer (Required) <u>Regions Bank</u>	<u>__/__/__</u>	\$
Occupation (Required) <u>Banker</u>	Aggregate year-to-date	\$ <u>100.00</u>
D. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Kelly Neal</u>	<u>11/30/10</u>	\$ <u>200.00</u>
Mailing Address <u>1527 Kimwood Circle</u>	<u>__/__/__</u>	\$
City, State, Zip Code <u>Jackson, ms 39211</u>	<u>__/__/__</u>	\$
Name of Employer (Required) <u>Capital Resources, LLC</u>	<u>__/__/__</u>	\$
Occupation (Required) <u>Event Coordinator / Fundraiser</u>	Aggregate year-to-date	\$ <u>200.00</u>

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Name of Candidate or Committee Friends of Quentin WhitwellReporting period Oct. 1, 2010 through Dec. 31, 2010

ITEMIZED RECEIPTS

A. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Ann H. Kelly</u>	<u>11/29/10</u>	\$ <u>100.00</u>
Mailing Address <u>1725 Sheffield Drive</u>	<u> </u> / <u> </u> / <u> </u>	\$
City, State, Zip Code <u>Jackson, MS 39211</u>	<u> </u> / <u> </u> / <u> </u>	\$
Name of Employer (Required) <u>none</u>	<u> </u> / <u> </u> / <u> </u>	\$
Occupation (Required) <u>Retired Attorney</u>	Aggregate year-to-date	\$ <u>100.00</u>
B. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Judy K. Morris</u>	<u>11/29/10</u>	\$ <u>100.00</u>
Mailing Address <u>2127 Brackenshire Circle</u>	<u> </u> / <u> </u> / <u> </u>	\$
City, State, Zip Code <u>Jackson, MS 39211</u>	<u> </u> / <u> </u> / <u> </u>	\$
Name of Employer (Required) <u>The Overby Company</u>	<u> </u> / <u> </u> / <u> </u>	\$
Occupation (Required) <u>Realtor</u>	Aggregate year-to-date	\$ <u>100.00</u>
C. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Hunter Carpenter</u>	<u>11/30/10</u>	\$ <u>50.00</u>
Mailing Address <u>5016 4th Street S.</u>	<u> </u> / <u> </u> / <u> </u>	\$
City, State, Zip Code <u>Columbus, MS 39701</u>	<u> </u> / <u> </u> / <u> </u>	\$
Name of Employer (Required) <u>Gov. Haley Barbour</u>	<u> </u> / <u> </u> / <u> </u>	\$
Occupation (Required) <u>Staffer</u>	Aggregate year-to-date	\$ <u>50.00</u>
D. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>John W. McGowan</u>	<u>11/30/10</u>	\$ <u>1,000.00</u>
Mailing Address <u>P.O. Box 55809</u>	<u> </u> / <u> </u> / <u> </u>	\$
City, State, Zip Code <u>Jackson, MS 39296</u>	<u> </u> / <u> </u> / <u> </u>	\$
Name of Employer (Required) <u>McGowan Working Partners</u>	<u> </u> / <u> </u> / <u> </u>	\$
Occupation (Required) <u>Oil & Gas</u>	Aggregate year-to-date	\$ <u>1,000.00</u>

Name of Candidate or Committee Friends of Quentin Whitwell
 Reporting period Oct. 1, 2010 through Dec. 31, 2010

ITEMIZED RECEIPTS

A. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name	<u>Samuel Lee Begley</u>	<u>11/30/10</u>	\$ <u>100.00</u>
Mailing Address	<u>123 North State Street</u>	<u>1/1/</u>	\$
City, State, Zip Code	<u>Jackson, MS 39201</u>	<u>1/1/</u>	\$
Name of Employer (Required)	<u>Begley Law Firm</u>	<u>1/1/</u>	\$
Occupation (Required)	<u>Attorney</u>	Aggregate year-to-date	\$ <u>100.00</u>
B. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name	<u>Douglas R. Boone</u>	<u>11/30/10</u>	\$ <u>25.00</u>
Mailing Address	<u>4307 Regency Court</u>	<u>1/1/</u>	\$
City, State, Zip Code	<u>Jackson, MS 39211</u>	<u>1/1/</u>	\$
Name of Employer (Required)	<u>Community Foundation of Greater Jackson</u>	<u>1/1/</u>	\$
Occupation (Required)	<u>Executive Director</u>	Aggregate year-to-date	\$ <u>25.00</u>
C. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name	<u>John W. Lange</u>	<u>11/30/10</u>	\$ <u>200.00</u>
Mailing Address	<u>1428 Highland Park Drive</u>	<u>1/1/</u>	\$
City, State, Zip Code	<u>Jackson, MS 39211</u>	<u>1/1/</u>	\$
Name of Employer (Required)	<u>Madison Services, Inc.</u>	<u>1/1/</u>	\$
Occupation (Required)	<u>Owner</u>	Aggregate year-to-date	\$ <u>200.00</u>
D. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name	<u>Travis Geiger</u>	<u>11/30/10</u>	\$ <u>100.00</u>
Mailing Address	<u>1776 Plantation Blvd.</u>	<u>1/1/</u>	\$
City, State, Zip Code	<u>Jackson, MS 39211</u>	<u>1/1/</u>	\$
Name of Employer (Required)	<u>MS Press Association</u>	<u>1/1/</u>	\$
Occupation (Required)	<u>Marketing Manager</u>	Aggregate year-to-date	\$ <u>100.00</u>

Name of Candidate or Committee Friends of Quentin WhitwellReporting period Oct. 1, 2010 through Dec. 31, 2010

ITEMIZED RECEIPTS

A. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Yvonne B. Horton</u>	<u>11/30/10</u>	\$ <u>100.00</u>
Mailing Address <u>1210 Vinson Drive</u>	<u>___/___/___</u>	\$
City, State, Zip Code <u>Bolton, ms 39041</u>	<u>___/___/___</u>	\$
Name of Employer (Required) <u>Precious Martin Sr. & Associates, PLLC</u>	<u>___/___/___</u>	\$
Occupation (Required) <u>Gov't. Relations</u>	Aggregate year-to-date	\$ <u>100.00</u>
B. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Jill B. Landrum</u>	<u>11/30/10</u>	\$ <u>250.00</u>
Mailing Address <u>120 Noah Mill's Road</u>	<u>___/___/___</u>	\$
City, State, Zip Code <u>Madison, ms 39110</u>	<u>___/___/___</u>	\$
Name of Employer (Required) <u>Primerica</u>	<u>___/___/___</u>	\$
Occupation (Required) <u>Office Manager</u>	Aggregate year-to-date	\$ <u>250.00</u>
C. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>James H. Gray, Jr.</u>	<u>11/30/10</u>	\$ <u>200.00</u>
Mailing Address <u>5325 Farnsworth Drive</u>	<u>___/___/___</u>	\$
City, State, Zip Code <u>Jackson, ms 39211</u>	<u>___/___/___</u>	\$
Name of Employer (Required) <u>University Physicians</u>	<u>___/___/___</u>	\$
Occupation (Required) <u>Medicine D.O. - Family Practitioner</u>	Aggregate year-to-date	\$ <u>200.00</u>
D. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>C. Delbert Hoseman, Jr.</u>	<u>11/30/10</u>	\$ <u>200.00</u>
Mailing Address <u>P.O. Box 23066</u>	<u>___/___/___</u>	\$
City, State, Zip Code <u>Jackson, ms 39225</u>	<u>___/___/___</u>	\$
Name of Employer (Required) <u>State of ms</u>	<u>___/___/___</u>	\$
Occupation (Required) <u>Secretary of State</u>	Aggregate year-to-date	\$ <u>200.00</u>

Name of Candidate or Committee Friends of Quentin WhitwellReporting period Oct 1, 2010 through Dec. 31, 2010

ITEMIZED RECEIPTS

A. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Benjamin W. Allen, III</u>		<u>11/30/10</u>	\$ <u>250.00</u>
Mailing Address <u>2517 Meadowbrook Road</u>		<u>1/1/</u>	\$
City, State, Zip Code <u>Jackson, MS 39211</u>		<u>1/1/</u>	\$
Name of Employer (Required) <u>Downtown Jackson Partners</u>		<u>1/1/</u>	\$
Occupation (Required) <u>President</u>		Aggregate year-to-date	\$ <u>250.00</u>
B. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Robert C. Lunardini</u>		<u>11/30/10</u>	\$ <u>100.00</u>
Mailing Address <u>5740 County Park Road</u>		<u>1/1/</u>	\$
City, State, Zip Code <u>Jackson, MS 39206</u>		<u>1/1/</u>	\$
Name of Employer (Required) <u>DBA Lucy Enterprises</u>		<u>1/1/</u>	\$
Occupation (Required) <u>Engineer</u>		Aggregate year-to-date	\$ <u>100.00</u>
C. Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Velocity Sports & Entertainment Group, Inc.</u>		<u>11/30/10</u>	\$ <u>250.00</u>
Mailing Address <u>P.O. Box 116067</u>		<u>1/1/</u>	\$
City, State, Zip Code <u>Jackson, MS 39236</u>		<u>1/1/</u>	\$
Name of Employer (Required)		<u>1/1/</u>	\$
Occupation (Required)		Aggregate year-to-date	\$ <u>250.00</u>
D. Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Compania Corporation</u>		<u>11/30/10</u>	\$ <u>500.00</u>
Mailing Address <u>P.O. Box 23126</u>		<u>1/1/</u>	\$
City, State, Zip Code <u>Jackson, MS 39225</u>		<u>1/1/</u>	\$
Name of Employer (Required)		<u>1/1/</u>	\$
Occupation (Required)		Aggregate year-to-date	\$ <u>500.00</u>

Name of Candidate or Committee Friends of Quentin WhittwellReporting period Oct. 1, 2010 through Dec. 31, 2010

ITEMIZED RECEIPTS

A. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Rosemary M. Seago</u>		<u>11/30/10</u>	\$ <u>100.00</u>
Mailing Address <u>2133 Brackenshire Circle</u>		<u>1/1/</u>	\$
City, State, Zip Code <u>Jackson, MS 39211</u>		<u>1/1/</u>	\$
Name of Employer (Required) <u>none</u>		<u>1/1/</u>	\$
Occupation (Required) <u>Homemaker</u>		Aggregate year-to-date	\$ <u>100.00</u>
B. Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Blackberry Records, Inc.</u>		<u>11/30/10</u>	\$ <u>200.00</u>
Mailing Address <u>P.O. Box 16469</u>		<u>1/1/</u>	\$
City, State, Zip Code <u>Jackson, MS 39236</u>		<u>1/1/</u>	\$
Name of Employer (Required)		<u>1/1/</u>	\$
Occupation (Required)		Aggregate year-to-date	\$ <u>200.00</u>
C. Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Fondren Place Apartments, LLC</u>		<u>11/30/10</u>	\$ <u>400.00</u>
Mailing Address <u>P.O. Box 55914</u>		<u>1/1/</u>	\$
City, State, Zip Code <u>Jackson, MS 39296</u>		<u>1/1/</u>	\$
Name of Employer (Required)		<u>1/1/</u>	\$
Occupation (Required)		Aggregate year-to-date	\$ <u>400.00</u>
D. Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Frascoigna Courtney, PLLC</u>		<u>11/30/10</u>	\$ <u>250.00</u>
Mailing Address <u>P.O. Box 23126</u>		<u>1/1/</u>	\$
City, State, Zip Code <u>Jackson, MS 39225</u>		<u>1/1/</u>	\$
Name of Employer (Required)		<u>1/1/</u>	\$
Occupation (Required) <u>Attorneys at Law</u>		Aggregate year-to-date	\$ <u>250.00</u>

Name of Candidate or Committee Friends of Quentin WhitwellReporting period Oct. 1, 2010 through Dec. 31, 2010

ITEMIZED RECEIPTS

A. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Robert P. Wise</u>	<u>11/9/10</u>	\$ <u>100.00</u>
Mailing Address <u>120 North Congress Street, Suite 902</u>	<u>—/—/—</u>	\$
City, State, Zip Code <u>Jackson, MS 39201</u>	<u>—/—/—</u>	\$
Name of Employer (Required) <u>Wise Carter</u>	<u>—/—/—</u>	\$
Occupation (Required) <u>Attorney</u>	Aggregate year-to-date	\$ <u>100.00</u>
B. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Matt Allen</u>	<u>11/30/10</u>	\$ <u>50.00</u>
Mailing Address <u>102 North Mill Street, Suite 1110</u>	<u>—/—/—</u>	\$
City, State, Zip Code <u>Jackson, MS 39201</u>	<u>—/—/—</u>	\$
Name of Employer (Required) <u>Brunini</u>	<u>—/—/—</u>	\$
Occupation (Required) <u>Attorney</u>	Aggregate year-to-date	\$ <u>50.00</u>
C. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Carl B. Easley, Jr.</u>	<u>11/30/10</u>	\$ <u>200.00</u>
Mailing Address <u>19 Sheffield Court</u>	<u>—/—/—</u>	\$
City, State, Zip Code <u>Jackson, MS 39211</u>	<u>—/—/—</u>	\$
Name of Employer (Required) <u>Carl B Easley Investments</u>	<u>—/—/—</u>	\$
Occupation (Required) <u>Investor</u>	Aggregate year-to-date	\$ <u>200.00</u>
D. Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Sharpe Solutions, LLC</u>	<u>11/09/10</u>	\$ <u>200.00</u>
Mailing Address <u>41621 Trawick Drive</u>	<u>—/—/—</u>	\$
City, State, Zip Code <u>Jackson, MS 39211</u>	<u>—/—/—</u>	\$
Name of Employer (Required)	<u>—/—/—</u>	\$
Occupation (Required)	Aggregate year-to-date	\$ <u>200.00</u>

Name of Candidate or Committee Friends of Quentin WhitwellReporting period Oct. 1, 2010 through Dec. 31, 2010

ITEMIZED RECEIPTS

A. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>David Pharr</u>	<u>12/1/10</u>	\$ <u>500.00</u>
Mailing Address <u>2046 Meadowbrook Road</u>	<u>1/1/10</u>	\$
City, State, Zip Code <u>Jackson, ms 39211</u>	<u>1/1/10</u>	\$
Name of Employer (Required) <u>Bradley Arant Boult Cummings</u>	<u>1/1/10</u>	\$
Occupation (Required) <u>Partner</u>	Aggregate year-to-date	\$ <u>500.00</u>
B. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Steven M. Inzinna</u>	<u>11/26/10</u>	\$ <u>100.00</u>
Mailing Address <u>215 Saint Andrews Drive</u>	<u>1/1/10</u>	\$
City, State, Zip Code <u>Jackson, ms 39211</u>	<u>1/1/10</u>	\$
Name of Employer (Required) <u>Astronision</u>	<u>1/1/10</u>	\$
Occupation (Required) <u>Owner</u>	Aggregate year-to-date	\$ <u>100.00</u>
C. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Lisa B. Ireland</u>	<u>11/28/10</u>	\$ <u>100.00</u>
Mailing Address <u>1418 Poplar Blvd.</u>	<u>1/1/10</u>	\$
City, State, Zip Code <u>Jackson, ms 39202</u>	<u>1/1/10</u>	\$
Name of Employer (Required) <u>none</u>	<u>1/1/10</u>	\$
Occupation (Required) <u>homemaker</u>	Aggregate year-to-date	\$ <u>100.00</u>
D. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Sampat S. Shivangi, M.D.</u>	<u>11/30/10</u>	\$ <u>200.00</u>
Mailing Address <u>104 Summer Lake Drive</u>	<u>1/1/10</u>	\$
City, State, Zip Code <u>Ridgeland, ms 39157</u>	<u>1/1/10</u>	\$
Name of Employer (Required) <u>US Info Systems of MS</u>	<u>1/1/10</u>	\$
Occupation (Required) <u>medical Doctor -OBGYN</u> <u>President/CEO</u>	Aggregate year-to-date	\$ <u>200.00</u>

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Name of Candidate or Committee Friends of Quentin WhitwellReporting period Oct. 1, 2010 through Dec. 31, 2010

ITEMIZED RECEIPTS

A. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Senator Walter Michel</u>		<u>11/30/10</u>	\$ <u>100.00</u>
Mailing Address <u>3670 Lakeland Drive Lane</u>		<u>1/1/10</u>	\$
City, State, Zip Code <u>Jackson, MS 39211</u>		<u>1/1/10</u>	\$
Name of Employer (Required) <u>J Walter Michel Agency, Inc.</u>		<u>1/1/10</u>	\$
Occupation (Required) <u>MS State Senator's Realtor</u>		Aggregate year-to-date	\$ <u>100.00</u>
B. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>law office</u>		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Law Offices of Malouf & Malouf</u>		<u>11/30/10</u>	\$ <u>200.00</u>
Mailing Address <u>501 E. Capital Street</u>		<u>1/1/10</u>	\$
City, State, Zip Code <u>Jackson, MS 39201</u>		<u>1/1/10</u>	\$
Name of Employer (Required) _____		<u>1/1/10</u>	\$
Occupation (Required) _____		Aggregate year-to-date	\$ <u>200.00</u>
C. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Heather Hixon</u>		<u>11/30/10</u>	\$ <u>500.00</u>
Mailing Address <u>2145 Brackenshire Circle</u>		<u>1/1/10</u>	\$
City, State, Zip Code <u>Jackson, MS 39211</u>		<u>1/1/10</u>	\$
Name of Employer (Required) <u>none</u>		<u>1/1/10</u>	\$
Occupation (Required) <u>homemaker</u>		Aggregate year-to-date	\$ <u>500.00</u>
D. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Lee King</u>		<u>11/30/10</u>	\$ <u>50.00</u>
Mailing Address <u>718 Greenbrook Drive</u>		<u>1/1/10</u>	\$
City, State, Zip Code <u>Bidgeland, MS 39157</u>		<u>1/1/10</u>	\$
Name of Employer (Required) <u>Lee King Productions, Inc.</u>		<u>1/1/10</u>	\$
Occupation (Required) <u>owner</u>		Aggregate year-to-date	\$ <u>50.00</u>

Name of Candidate or Committee Friends of Quentin Whitwell
 Reporting period Oct. 1, 2010 through Dec. 31, 2010

ITEMIZED RECEIPTS

A. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Laurence H. Gurley</u>	<u>11/30/10</u>	\$ <u>50.00</u>
Mailing Address <u>4216 I-55 North, Suite 106</u>	<u> / / </u>	\$
City, State, Zip Code <u>Jackson, MS 39211</u>	<u> / / </u>	\$
Name of Employer (Required) <u>Meadowbrook Capital</u>	<u> / / </u>	\$
Occupation (Required) <u>Partner</u>	Aggregate year-to-date	\$ <u>50.00</u>
B. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Jesse Thompson</u>	<u>11/30/10</u>	\$ <u>25.00</u>
Mailing Address <u>6148 Whitestone Road</u>	<u> / / </u>	\$
City, State, Zip Code <u>Jackson, MS 39206</u>	<u> / / </u>	\$
Name of Employer (Required) <u>Jackson Music Awards, Inc.</u>	<u> / / </u>	\$
Occupation (Required) <u>Owner</u>	Aggregate year-to-date	\$ <u>25.00</u>
C. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Robert F. Wilkins</u>	<u>11/30/10</u>	\$ <u>150.00</u>
Mailing Address <u>1200 Meadowbrook Road, Apt. 26</u>	<u> / / </u>	\$
City, State, Zip Code <u>Jackson, MS 39206</u>	<u> / / </u>	\$
Name of Employer (Required) <u>Rocky Wilkins Law Firm PLLC</u>	<u> / / </u>	\$
Occupation (Required) <u>Attorney</u>	Aggregate year-to-date	\$ <u>150.00</u>
D. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>George W. Butler, Jr.</u>	<u>11/30/10</u>	\$ <u>50.00</u>
Mailing Address <u>1316 Rollingwood Drive</u>	<u> / / </u>	\$
City, State, Zip Code <u>Jackson, MS 39211</u>	<u> / / </u>	\$
Name of Employer (Required) <u>Grantham Poole</u>	<u> / / </u>	\$
Occupation (Required) <u>CPA</u>	Aggregate year-to-date	\$ <u>50.00</u>

Name of Candidate or Committee Friends of Quentin WhitwellReporting period Oct. 1, 2010 through Dec. 31, 2010

ITEMIZED RECEIPTS

A. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Neeli H. Graham</u>	<u>11/30/10</u>	\$ <u>200.00</u>
Mailing Address <u>1532 Robert Drive</u>	<u> </u> / <u> </u> / <u> </u>	\$
City, State, Zip Code <u>Jackson, MS 39211</u>	<u> </u> / <u> </u> / <u> </u>	\$
Name of Employer (Required) <u>Pfizer, Inc.</u>	<u> </u> / <u> </u> / <u> </u>	\$
Occupation (Required) <u>Oncology Specialty Representative</u>	Aggregate year-to-date	\$ <u>200.00</u>
B. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Jay J. Brown</u>	<u>11/30/10</u>	\$ <u>100.00</u>
Mailing Address <u>2159 Southwood Road</u>	<u> </u> / <u> </u> / <u> </u>	\$
City, State, Zip Code <u>Jackson, MS 39211</u>	<u> </u> / <u> </u> / <u> </u>	\$
Name of Employer (Required) <u>The Eye Group of MS</u>	<u> </u> / <u> </u> / <u> </u>	\$
Occupation (Required) <u>Medical Doctor - Ophthalmologist</u>	Aggregate year-to-date	\$ <u>100.00</u>
C. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Thomas M. Hewitt</u>	<u>11/30/10</u>	\$ <u>100.00</u>
Mailing Address <u>P.O. Box 13364</u>	<u> </u> / <u> </u> / <u> </u>	\$
City, State, Zip Code <u>Jackson, MS 39236</u>	<u> </u> / <u> </u> / <u> </u>	\$
Name of Employer (Required) <u>none</u>	<u> </u> / <u> </u> / <u> </u>	\$
Occupation (Required) <u>student</u>	Aggregate year-to-date	\$ <u>100.00</u>
D. Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Mint, Inc.</u>	<u>11/30/10</u>	\$ <u>250.00</u>
Mailing Address <u>6119 Waverly Drive</u>	<u> </u> / <u> </u> / <u> </u>	\$
City, State, Zip Code <u>Jackson, MS 39206</u>	<u> </u> / <u> </u> / <u> </u>	\$
Name of Employer (Required)	<u> </u> / <u> </u> / <u> </u>	\$
Occupation (Required)	Aggregate year-to-date	\$ <u>250.00</u>

Name of Candidate or Committee Friends of Quentin WhitwellReporting period Oct. 1, 2010 through Dec. 31, 2010

ITEMIZED RECEIPTS

A. Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Thompson and Associates, LLC</u>		<u>11/30/10</u>	\$ <u>200.00</u>
Mailing Address <u>814 North President Street</u>		<u> </u> / <u> </u> / <u> </u>	\$
City, State, Zip Code <u>Jackson, ms 39202</u>		<u> </u> / <u> </u> / <u> </u>	\$
Name of Employer (Required) _____		<u> </u> / <u> </u> / <u> </u>	\$
Occupation (Required) _____		Aggregate year-to-date	\$ <u>200.00</u>
B. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Dana F. Robertson</u>		<u>11/30/10</u>	\$ <u>50.00</u>
Mailing Address <u>2470 Sand Ridge Drive</u>		<u> </u> / <u> </u> / <u> </u>	\$
City, State, Zip Code <u>Jackson, ms 39211</u>		<u> </u> / <u> </u> / <u> </u>	\$
Name of Employer (Required) <u>The Greater Eastover Neighborhood</u>		<u> </u> / <u> </u> / <u> </u>	\$
Occupation (Required) <u>Executive</u>		Aggregate year-to-date	\$ <u>50.00</u>
C. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name _____		<u> </u> / <u> </u> / <u> </u>	\$
Mailing Address _____		<u> </u> / <u> </u> / <u> </u>	\$
City, State, Zip Code _____		<u> </u> / <u> </u> / <u> </u>	\$
Name of Employer (Required) _____		<u> </u> / <u> </u> / <u> </u>	\$
Occupation (Required) _____		Aggregate year-to-date	\$
D. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name _____		<u> </u> / <u> </u> / <u> </u>	\$
Mailing Address _____		<u> </u> / <u> </u> / <u> </u>	\$
City, State, Zip Code _____		<u> </u> / <u> </u> / <u> </u>	\$
Name of Employer (Required) _____		<u> </u> / <u> </u> / <u> </u>	\$
Occupation (Required) _____		Aggregate year-to-date	\$

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